

**Exhibit H**

**Name of Outlet Transferring Product:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name of Outlet Receiving Product:** \_\_\_\_\_

**Prepared by:** \_\_\_\_\_ **Name of Outlet** \_\_\_\_\_

**Date Report Prepared:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Approved by RA:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_

RA Signature

<b>PRODUCT(S)</b>						
Product Transferred From						
Total						
Product Received						
Total						

**Note: A copy must be kept on file at each outlet and the RA.**  
**NO PRODUCT CAN BE IN AN OUTLET MORE THAN 6 MONTHS**